

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

18/5/1990  
REQUEST FOR PATENT FEE REFUND

1 Date of Request: \_\_\_\_\_

2 Serial/Patent # 90/521790

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing				\$
Amendment				\$
Extension of Time				\$
Notice of Appeal/Appeal				\$
Petition				\$
Issue				\$
Cert of Correction/Terminal Disc.				\$
Maintenance				\$
Assignment				\$
Other				\$
		7 TOTAL AMOUNT OF REFUND	\$	
		8 TO BE REFUNDED BY:	Refund Date: 05/15/1990 6638822589	
		Treasury Check	Credit Card Refund Total: \$500.00	
		Credit Deposit A/C #:		
		9	Exp.:	XXXXXX123456789
10 REASON:				
Overpayment				
Duplicate Payment				
No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME:		TITLE:		
SIGNATURE:		PHONE: -500.00 OP		
OFFICE:		***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****		
APPROVED:		DATE:		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: